



WR ID# 4244503

STATE OF WASHINGTON  
DEPARTMENT OF ECOLOGY

PROGRESS SHEET

COMPUTER INPUT

- ☐ APPLICATION  
☐ PERMIT  
☐ CERTIFICATE  
☐ OTHER

Contact: Bill Pope, KID Staff Engineer  
(address & phone the same as KID)

☒ SURFACE WATER ☐ GROUND WATER

NAME Kennewick Irrigation District		509.586.9111 (H)		TELEPHONE NO. 509.586.7663 (W)	
ADDRESS 12 W. Kennewick Ave.		(CITY) Kennewick	(STATE) WA	(ZIP CODE) 99336-3832	
ASSIGNED TO			TELEPHONE NO.	DATE ASSIGNED	
ADDRESS		(CITY)	(STATE)	(ZIP CODE)	
APPLICATION NO. <u>34-35067</u>	PERMIT NO.		CERTIFICATION NO.		
DATE AMENDED	DATE CANCELLED		W.R.I.A. <u>37 BENTON</u>		
<b>APPLICATION</b>					
DATE APPLICATION RECEIVED <u>SEPTEMBER 19, 2005</u>		INITIAL \$10.00 FEE RECEIVED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		DATE FEE RECEIVED <u>\$12.00 RECEIVED</u> <u>CHECK RETURNED 09-19-05</u>	
STATEMENT OF ADDITIONAL EXAMINATION FEE \$		DATE SENT		DATE RECEIVED	
DATE RETURNED FOR COMPLETION OR CORRECTION			DATE RECEIVED		
<b>ER TEMPORARY PERMIT DROUGHT</b>					
APPROVED BY <u>RFB</u>			DATE ISSUED <u>9/23/2005</u>		
<b>PUBLICATION</b>					
APPROVED BY		DATE APPROVED		DATE NOTICE SENT	
PROTESTED BY AND DATE					
DATE AFFIDAVIT RECEIVED	CHECKED BY	TIME EXPIRED	DATE AMENDED NOTICE SENT	DATE AFFIDAVIT RECEIVED	TIME EXPIRED
<b>DEPARTMENT OF FISH AND WILDLIFE REPORT</b>					
APPROVED		PROVISO		PROTEST	
<b>EXAMINATION</b>					
DATE EXAMINATION MADE	MADE BY	DATE REPORT OF EXAM. WRITTEN		WRITTEN BY	CHECKED BY
DATE PERMIT FEE REQUESTED		AMOUNT DUE		DATE RECEIVED	
<b>PERMIT</b>					
PERMIT APPROVED BY	DATE APPROVED		PERMIT NO.	DATE ISSUED	
<b>BEGINNING OF CONSTRUCTION</b>					
DATE NOTICE SENT		DATE FILED		EXTENSION FEE	
EXTENDED TO			EXTENDED TO		
<b>WELL DRILLER'S AND/OR CONSTRUCTION REPORT</b>					
DATE SENT			DATE FILED		
<b>COMPLETION OF CONSTRUCTION</b>					
DATE NOTICE SENT		DATE FILED		EXTENSION FEE	
EXTENDED TO			EXTENDED TO		
<b>PROOF OF APPROPRIATION</b>					
DATE SENT	DATE FILED		EXTENSION FEE		EXTENDED TO
DATE CERTIFICATE FEE REQUESTED	AMOUNT DUE	DATE RECEIVED	DATE APPROVED FOR CERTIFICATE		APPROVED BY
<b>CERTIFICATION</b>					
PROOF EXAM. REQUIRED <input type="checkbox"/> YES <input type="checkbox"/> NO		CERTIFICATE NUMBER		DATE ISSUED	

REMARKS